

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 4023 Rousseau	
CITY PVP	ZIP 90274
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT 1
TRACT 26545	BLOCK
OWNER Lawrence DeCoster	LOT NO. 121
ADDRESS 4023 Rousseau	

CITY PVP	ZIP 90274
ARCHITECT OR ENGINEER R.J. Kolodziej	TEL. NO. 923-7751
ADDRESS 5871 Firestone Blvd.	
CONTRACTOR Anthony Pools	TEL. NO. 923-7751
ADDRESS 5871 Firestone	LIC. NO. 190179
CITY So. Gate	LIC. CLASS C-53
CONSTRUCTION LENDER NAME AND BRANCH unknown	

ADDRESS	CITY
SQ. FT. SIZE 575	NO. OF STORIES
NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK	NEW <input type="checkbox"/>
private swim pool and spa	ADD <input checked="" type="checkbox"/>
	ALTER <input type="checkbox"/>
	REPAIR <input type="checkbox"/>
USE OF EXISTING BLDG.	DEMOL <input type="checkbox"/>
private residence	

APPLICANT (PRINT)	TEL. NO.
Anthony Pools	923-7751
BY (SIGNATURE)	
Anthony Pools	

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE.

SIGNATURE OF PERMITTEE	
Anthony Pools	
ADDRESS	
5871 Firestone Blvd.	
CITY	
So. Gate	
TEL. NO.	923-7751

P.C. Fee \$	36.96	Permit Fee	66.00
		Issuance Fee	7.00
		Total Fee	73.00

BUILDING ADDRESS 4023 Rousseau			
LOCALITY Co.			
NEAREST CROSS ST. Montaigne Way			
ASSESSOR MAP BOOK		PAGE	PARCEL
DISTRICT 12.00	GROUP Pool & Spa	TYPE CONST.	FIRE ZONE
STATISTICAL CLASSIFICATION		SEWER MAP	
CLASS NO. 31		DWELL. UNITS 0	BK 62 PG

VALUATION \$	9136
--------------	------

BLDG. SETBACK FROM FRONT PROP. LINE OF _____ (STREET)			
HIGHWAY + YARD =	TOTAL SETBACK FROM FRONT PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+	=		

BLDG. SETBACK FROM SIDE PROP. LINE OF _____ (STREET)			
HIGHWAY + YARD =	TOTAL SETBACK FROM SIDE PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+	=		

USE ZONE RA	MAP NO. 4913
SPECIAL CONDITIONS	
FINAL DATE 3-2-81	BY Juno

CONSTRUCTION TO CONFORM WITH EXPANSIVE SOIL DETAILS OF PLANS

[Signature]

OK to issue per Bob Smith

6-10-80

PLAN CHECK VALIDATION

PERMIT VALIDATION

8502A

#.....21

1..3696

..3696

0528-80

8907A

#.....1

1..7300

..7300

0610-80

INSPECTOR COPY

PLANS TO APPLICANT					INSPECTOR'S NOTES	
TO:		RETURNED		APPROVED		
NO	DATE	NO.	DATE			
APPROVALS		REQUIRED		DATE RECEIVED OR APPROVED		
		YES	NO			
WATER CERTIFICATE						
HEALTH DEPARTMENT						
FIRE DEPARTMENT						
GRADING						
GEOLOGICAL						
PEDESTRIAN PROTECTION (FENCE) (CANOPY)						
SPECIAL INSPECTION (CONC.) (MASNRY.) (WELDG.)						
LOT DRAINAGE						
PARKING						
APPROVALS	DATE	INSPECTOR'S SIGNATURE				
LOCATION- (SETBACK & YARDS)	6/25/87	[Signature]				
FOUNDATIONS BONDING						
FRAME						
LATH DRYWALL INTERIOR	8-25-80	[Signature]				
LATH EXTERIOR						
HOUSE NUMBER CORRECT & POSTED						
ENERGY INSULATION						
FINAL ENTER ON FRONT						

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 4023 Rousseau		
CITY PVP CO.	ZIP 90274	
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT	
TRACT 26545	BLOCK	LOT NO. 121
OWNER Lawrence DeCoster TEL. NO. 841-5213		
ADDRESS 4023 Rousseau		
CITY PVP	ZIP 90274	
ARCHITECT OR ENGINEER R.J. Kolodziej TEL. NO. 867-2703		

ADDRESS 5871 E. Firestone		
CONTRACTOR Anthony Pools TEL. NO. 867-2703		
ADDRESS 5871 E. Firestone LIC. NO. 90179		
CITY South Gate LIC. CLASS C-53		
CONSTRUCTION LENDER NAME AND BRANCH unknown		

ADDRESS	CITY		CHECK ONE
SQ. FT. SIZE 575	NO. OF STORIES	NO. OF FAMILIES	
DESCRIPTION OF WORK			NEW <input checked="" type="checkbox"/>
private swim pool and spa			ADD <input type="checkbox"/>
Alt. 25573			ALTER <input type="checkbox"/>
USE OF EXISTING BLDG private residence			REPAIR <input type="checkbox"/>
APPLICANT (PRINT) Anthony Pools TEL. NO. 867-2703			DEMOL <input type="checkbox"/>

BY (SIGNATURE) *[Signature]* for Anthony Pools

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE.

SIGNATURE OF PERMITTEE <i>[Signature]</i> for Anthony Pools		
ADDRESS 5871 E. Firestone		
CITY South Gate TEL. NO. 867-2703		

USE ZONE RA	MAP NO. 4913
SPECIAL CONDITIONS	
FINAL DATE Exposed Nowood Lane	BY <i>[Signature]</i>

BUILDING ADDRESS 4023 Rousseau	
LOCALITY Co.	
NEAREST CROSS ST. Montargne Way	
ASSESSOR MAP BOOK	PAGE
DISTRICT 12.	GROUP Pool + spa
TYPE CONST.	FIRE ZONE
PROCESSED BY JB/HI	
STATISTICAL CLASSIFICATION CLASS NO. 31 DWELL. UNITS 2	
SEWER MAP BK 62 PG 8	
VALUATION \$ 9136	

BLDG. SETBACK FROM FRONT PROP. LINE OF _____ (STREET)			
HIGHWAY + YARD =	TOTAL SETBACK FROM FRONT PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+ =			

BLDG. SETBACK FROM SIDE PROP. LINE OF _____ (STREET)			
HIGHWAY + YARD =	TOTAL SETBACK FROM SIDE PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+ =			

P.C. Fee \$ 36.96	Permit Fee 666.00
	Issuance Fee 7.00
	Total Fee 73.00

CONSTRUCTION TO CONFORM WITH EXPANSIVE SOIL DETAILS OF PLANS

PLAN CHECK VALIDATION

#7298A
#.....1
1...3696
5...3696
0...8-79

PERMIT VALIDATION

#781.8A
#.....1
1...7300
...7300
0061-79

INSPECTOR COPY

APPROVALS	DATE	INSPECTOR'S SIGNATURE
LOCATION- (SETBACK & YARDS)		
FOUNDATIONS		
FRAME		
LATH/DRYWALL INTERIOR		
LATH-EXTERIOR		
HOUSE NUMBER: CORRECT & POSTED		
ENERGY INSULATION		
FINAL ENTER ON FRONT		

INSPECTOR'S NOTES	
WORKER'S COMPENSATION CERTIFICATION	
I certify that I will be responsible for the work to be done under this permit and that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.	
I further certify that if during the course of construction under this permit I should become subject to Worker's Compensation requirements, I will file the required certificate of insurance and realize that failure to do so will necessitate suspension of the permit. I have received an explanation of the limits and conditions of this certificate and have read and fully understand them.	
Signature	<u>[Signature]</u>
Title	<u>agent</u>
Date	<u>6/1/79</u>

APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES BUILDING AND SAFETY

FOR APPLICANT TO FILL IN				JOB ADDRESS	
New Residential Bldgs. & Pools	EACH	NO.	FEE	LOCALITY	
1 & 2-Family, Sq. Ft. _____	\$	—	\$	PVP	
Multi-family Sq. Ft. _____		—		NEAREST CROSS ST.	
Residential Swimming Pools		1	25.00	OWNER OR FIRM NAME	Lawrence DeCoster
Outlets: Rec. _____ Light _____ Sw. _____				MAIL ADDRESS	4023 Rousseau
First 20 _____				CITY	PVP Tel. No 541-5213
Total No. _____ Additional _____				PLAN CHECK APPLICANT	Anthony Pools
Lighting Fixtures				ADDRESS	5871 Firestone Blvd.
First 20 _____				CITY	So. Gate Tel. No 923-7751
Total No. _____ Additional _____				PERMIT APPLICANT	Anthony Pools
Fixed Appliances Not Over 1 HP				ADDRESS	5871 Firestone Blvd.
Range _____ Heater _____ D.W. _____				CITY	So. Gate Tel. No 923-7751
Oven _____ Dryer _____ W.M. _____				LICENSE OR REG. NUMBER	190179 Class. C-53
Top _____ FAU _____ W.H. _____				I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.	
Hood _____ Fan _____ Other _____				I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.	
Disp. _____ Room Air Cond. _____				PERMIT SIGNATURE	<i>Anthony Pools</i> / Anthony Pools
Power Apparatus & Large Appliances				DISTRICT NO.	3-2-81
Size & Type HP, KW, KVA, or KVAR				PROCESSED BY	<i>James</i>
_____ Up to 1 Incl.				<div style="border: 1px solid black; padding: 5px; display: inline-block;"> INSPECTION INFORMATION ON REVERSE SIDE </div>	
_____ Over 1 to 10 Incl.					
_____ Over 10 to 50 Incl.					
_____ Over 50 to 100 Inc.					
_____ Over 100					
Services					
0 - 200 Amp. Under 600 V					
201 - 1000 Amp. Under 600 V					
Over 1000 Amp. or Over 600 V					
Temp. Power Pole & Appurtenances					
Sign with One Branch Circuit					
Additional Sign Branch Circuits					
Misc. Conduits & Conductors					
Other (See Complete Fee Schedule)					
PERMIT FEE		(Sub-Total)			
PLAN CHECKING FEE		(One-Fourth Permit Fee)	7.00		
PERMIT ISSUING FEE			32.00		
TOTAL FEE					

INSPECTOR COPY

PLAN CHECK VALIDATION

PERMIT VALIDATION

8910A
#.....2
1...3200
...3200
0610-80

INSPECTION FINALED
date: _____ By _____

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE		
UNDERSLAB WORK	6-7-90	<i>[Signature]</i>
ROUGH CONDUIT		
WIRING		
FIXTURES		
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL	<i>Enter on Front</i>	

NOTES

0810-80

...35005

1...2500

#.....S

58810V

APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES **BUILDING AND SAFETY**

FOR APPLICANT TO FILL IN				JOB ADDRESS	
Description	EACH	NO.	FEE	Address	City
New Residential Bldgs. & Pools	\$	—	\$	4023 Rousseau	PVP
1 & 2-Family, Sq. Ft. _____		—			
Multi-family Sq. Ft. _____		—			
Residential Swimming Pools		1	25.00		
Outlets: Rec _____ Light _____ Sw. _____					
First 20 _____					
Total No. _____ Additional _____					
Lighting Fixtures					
First 20 _____					
Total No. _____ Additional _____					
Fixed Appliances Not Over 1 HP					
Range _____ Heater _____ D.W. _____					
Oven _____ Dryer _____ W.M. _____					
Top _____ FAU _____ W.H. _____					
Hood _____ Fan _____ Other _____					
Disp. _____ Room Air Cond. _____					
Power Apparatus & Large Appliances					
Size & Type HP, KW, KVA, or KVAR					
_____ Up to 1 Incl.					
_____ Over 1 to 10 Incl.					
_____ Over 10 to 50 Incl.					
_____ Over 50 to 100 Inc.					
_____ Over 100					
Services					
0 - 200 Amp. Under 600 V		1	12.50		
201 - 1000 Amp. Under 600 V					
Over 1000 Amp. or Over 600 V					
Temp. Power Pole & Appurtenances					
Sign with One Branch Circuit					
Additional Sign Branch Circuits					
Misc. Conduits & Conductors					
Other (See Complete Fee Schedule)					
PERMIT FEE					
PLAN CHECKING FEE					
PERMIT ISSUING FEE					
TOTAL FEE					

INSPECTION INFORMATION ON REVERSE SIDE

PLAN CHECK VALIDATION

PERMIT VALIDATION

JOB ADDRESS 4023 Rousseau	
LOCALITY PVP	
NEAREST CROSS ST. Crenshaw & Academy	
OWNER OR FIRM NAME Lawrence DeCoster	
MAIL ADDRESS 4023 Rousseau	
CITY PVP	Tel. No. 541-5213
PLAN CHECK APPLICANT Anthony Pools	
ADDRESS 5871 E. Firestone	
CITY South Gate	Tel. No. 867-2703
PERMIT APPLICANT Anthony Pools	
ADDRESS 5871 E. Firestone	
CITY South Gate	Tel. No. 867-2703
LICENSE OR REG. NUMBER 190179 Class. C-53	
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.	
I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.	
PERMITEE SIGNATURE <i>[Signature]</i> for Anthony Pools	
DISTRICT NO. 13.00	PROCESSED BY T.L.

INSPECTION FINALED

date: By *Expired No work done 10-15-79*

INSPECTOR COPY

2781.7A

#.....2

1...44.50

...44.508

0061-79

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE		
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING		
FIXTURES		
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL	<i>Enter on Front</i>	

NOTES

WORKER'S COMPENSATION CERTIFICATION

I certify that I will be responsible for the work to be done under this permit and that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

I further certify that if during the course of construction under this permit I should become subject to Worker's Compensation requirements, I will file the required certificate of insurance and realize that failure to do so will necessitate suspension of the permit. I have received an explanation of the limits and conditions of this certificate and have read and fully understand them.

Signature

Title

Date

4/1/78
John Z

APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	@	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
1	SWIMMING POOL RECEPTOR		3.00
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
1	GAS SYSTEM OUTLETS		3.00
	OUTLETS OVER 5 PER SYSTEM		
1	Full Live		3.00

Plan check fee

PLUMBING PERMIT ISSUING FEE \$

7.00

TOTAL FEE

16.00

Plan check applicant

Name **Anthony Pools**
Address **5871 Firestone Blvd.**
City **So. Gate** Tel. No. **923-7751**

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE *Anthony Pools*
OF PERMITTEE

DISTRICT NO.

12.00

PROCESSED BY

*JP*INDUSTRIAL
WASTE APPROVAL

BUILDING ADDRESS	4023 Rousseau	
LOCALITY	PVP	
NEAREST CROSS ST.		
OWNER	Lawrence DeCoster	
MAIL ADDRESS	4023 Rousseau	
CITY	PVP	TEL. NO. 541-5213
CONTRACTOR	Anthony Pools	
ADDRESS	5871 Firestone Blvd.	
CITY	So. Gate	TEL. NO. 923-7751
STATE LICENSE NO.	190179	LIC. CLASS C-53

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK		
ROUGH PLUMBING		
GAS PIPING	8-7-80	<i>John</i>
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
GAS TEST	8-7-80	<i>John</i>
UTILITY CO. NOTIFIED		
FINAL	3-2-81	<i>John</i>

PLAN CHECK VALIDATION

PERMIT VALIDATION

28908A

#.....5

1...1600

...1600

0610-80

INSPECTOR COPY

APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	@	FEE	BUILDING ADDRESS	4023 Rousseau	
	WATER CLOSET			LOCALITY	PVP	
	BATH TUB			NEAREST CROSS ST.	Crenshaw & Academy	
	SHOWER			OWNER	Lawrence DeCoster	
	LAVATORY			MAIL ADDRESS	4023 Rousseau	
	SINK			CITY	PVP	TEL. NO. 541-5213
	DISHWASHER			CONTRACTOR	Anthony Pools	
	CLOTHES WASHER			ADDRESS	5871 E. Firestone	
1	SWIMMING POOL RECEPTOR		3 00	CITY	South Gate	TEL. NO. 867-2703
	LAWN SPRINKLER SYSTEM			STATE LICENSE NO.	190179	LIC. CLASS C-53
	WATER HEATER					
1	GAS SYSTEM OUTLETS		3 00			
	OUTLETS OVER 5 PER SYSTEM					
1	WATER PIPING		3 00			
Plan check fee						
PLUMBING PERMIT ISSUING FEE \$				7 00		
TOTAL FEE				16 00		
Plan check applicant						
Name Anthony Pools						
Address 5871 E. Firestone						
City South Gate Tel. No. 867-2703						
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.						
I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.						
SIGNATURE OF PERMITTEE <i>[Signature]</i> for Anthony Pools						
DISTRICT NO. 12-00				PROCESSED BY T.I.		
INDUSTRIAL WASTE APPROVAL						

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK		
ROUGH PLUMBING		
GAS PIPING		<i>E. Pools</i>
GAS VENT		
HOT WATER HEATER		<i>No work</i>
PLUMBING FIXTURES		
GAS TEST		
UTILITY CO. NOTIFIED		<i>done</i>
FINAL	10-15-79	

PLAN CHECK VALIDATION

PERMIT VALIDATION

2781.5A
#.....5
1..1600
...16005
0061-79

INSPECTOR COPY

WORKER'S COMPENSATION CERTIFICATION

I certify that I will be responsible for the work to be done under this permit and that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

I further certify that if during the course of construction under this permit I should become subject to Worker's Compensation requirements, I will file the required certificate of insurance and realize that failure to do so will necessitate suspension of the permit. I have received an explanation of the limits and conditions of this certificate and have read and fully understand them.

Signature _____

Title _____

Date _____

James E. Agent
6/1/79

21874

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APPLICATION FOR PERMIT
HEATING - VENTILATING - AIR CONDITIONING

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE	
	ABSORPTION UNIT, BTU _____		
	AIR HANDLING UNIT, CFM _____		
1	BOILER, BTU <u>380,000</u>	20	00
	COMPRESSOR, BTU _____		
	VENTILATION SYSTEM _____		
	EVAPORATIVE COOLER _____		
	FURNACE: FAU _____ GRAVITY _____ FLOOR _____ BTU _____		
	HEATER: SUSPENDED _____ UNIT _____ WALL _____		

Plan check fee 25% of above.

PERMIT ISSUING FEE \$ 7 60

TOTAL FEE 27 00

PLAN CHECK APPLICANT

NAME Anthony Pools

ADDRESS 5871 Firestone Blvd.

CITY So. Gate TEL. NO 923-7751

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING HEATING, VENTILATING, AIR CONDITIONING.

I HEREBY CERTIFY THAT I AM NOT ACTING IN VIOLATION OF CHAPTER 9, DIVISION 3, OF THE BUSINESS AND PROFESSIONAL CODE OF THE STATE OF CALIFORNIA.

SIGNATURE [Signature] / Anthony Pools
OF PERMITTEE

DISTRICT NO. 12.00

PROCESSED BY [Signature]

BUILDING ADDRESS	<u>4023 Rousseau</u>	
LOCALITY	<u>PVP</u>	
NEAREST CROSS ST.		
OWNER	<u>Lawrence DeCoster</u>	
MAIL ADDRESS	<u>4023 Rousseau</u>	
CITY	<u>PVP</u>	TEL. NO <u>541-5213</u>
CONTRACTOR	<u>Anthony Pools</u>	
ADDRESS	<u>5871 Firestone Blvd.</u>	
CITY	<u>So. Gate</u>	TEL. NO <u>923-7751</u>
STATE LICENSE NO.	<u>190179</u>	LIC. CLASS <u>C-53</u>

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH	<u>3/2/81</u>	<u>[Signature]</u>
FINAL		

INSPECTION RECORD

PLAN CHECK VALIDATION

PERMIT VALIDATION

28909A
#...41
1...2700
...2700
0610-80

INSPECTOR COPY

APPLICATION FOR PERMIT
HEATING - VENTILATING - AIR CONDITIONING

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE	
	ABSORPTION UNIT, BTU _____		
	AIR HANDLING UNIT, CFM _____		
1	BOILER, BTU <u>380,000</u>	20	00
	COMPRESSOR, BTU _____		
	VENTILATION SYSTEM _____		
	EVAPORATIVE COOLER _____		
	FURNACE: FAU _____ GRAVITY _____ FLOOR _____ BTU _____		
	HEATER: SUSPENDED _____ UNIT _____ WALL _____		

Plan check fee 25% of above.

PERMIT ISSUING FEE \$ 7 60

TOTAL FEE 27 00

PLAN CHECK APPLICANT

NAME Anthony Pools

ADDRESS 5871 E. Firestone

CITY South Gate TEL. NO 867-2703

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING HEATING, VENTILATING, AIR CONDITIONING.

I HEREBY CERTIFY THAT I AM NOT ACTING IN VIOLATION OF CHAPTER 9, DIVISION 3 OF THE BUSINESS AND PROFESSIONAL CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE [Signature] for Anthony Pools

DISTRICT NO.

PROCESSED BY

12.00

T.I.

BUILDING ADDRESS	<u>4023 Rousseau</u>	
LOCALITY	<u>PVP</u>	
NEAREST CROSS ST.	<u>Crenshaw & Academy</u>	
OWNER	<u>Lawrence DeCoster</u>	
MAIL ADDRESS	<u>4023 Rousseau</u>	
CITY	<u>PVP</u>	TEL. NO. <u>541-5213</u>
CONTRACTOR	<u>Anthony Pools</u>	
ADDRESS	<u>5871 E. Firestone</u>	
CITY	<u>South Gate</u>	TEL. NO. <u>867-2703</u>
STATE LICENSE NO.	<u>190179</u>	LIC. CLASS <u>C-53</u>

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH	<u>20</u>	<u>[Signature]</u>
FINAL	<u>work done</u>	<u>[Signature]</u>
INSPECTION RECORD		
<u>10-13-79</u>		

PLAN CHECK VALIDATION

PERMIT VALIDATION

2781.6A

#...41

1...2700

...27008

0061-79

INSPECTOR COPY

WORKER'S COMPENSATION CERTIFICATION

I, certify that I will be responsible for the work to be done under this permit and that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

I further certify that if during the course of construction under this permit I should become subject to Worker's Compensation requirements, I will file the required certificate of insurance and realize that failure to do so will necessitate suspension of the permit. I have received an explanation of the limits and conditions of this certificate and have read and fully understand them.

Signature

Title

Date

Anthony P. Pires
agent
6/1/74

0001-79
0002-79
0003-79
0004-79
0005-79
0006-79
0007-79
0008-79
0009-79
0010-79

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

FEE RECEIPT

WHEN VALIDATED THIS IS A RECEIPT FOR THE AMOUNT OF FEE COLLECTED AS SHOWN IN SPACE BELOW. THE SERIAL NUMBER, DATE AND AMOUNT VALIDATED HEREON HAS ALSO BEEN VALIDATED ON YOUR APPLICATION OR OTHER DOCUMENT AND HAS BECOME A PART OF THE RECORDS OF THE COUNTY OF LOS ANGELES, FROM WHICH THIS RECEIPT MAY BE IDENTIFIED.

☒ PLAN CHECKING-VALUATION \$ 10,000.00
STORIES _____ CLASS _____
☐ GRADING PLAN CHECKING _____ VOLUME _____ CU. YDS.
☐ ELECTRICAL PLAN CHECKING
☐ PLUMBING PLAN CHECKING
☐ MECHANICAL PLAN CHECKING
☐ ENERGY PLAN CHECK
☐ RELOCATION APPLICATION
☐ SPECIAL INSPECTOR
☐ JOURNEYMAN PLUMBER EXAMINATION
☐ _____

☐ WITNESS FEE & MILEAGE
☐ GRADING CASH BOND
☐ TRAILER APPLICATION
☐ E.I.R. FEES
☐ REHEARING FEE
☐ _____

RECEIVED OF: Anthony Pools
JOB ADDRESS: 4023 Rousseau

NOTICE

APPLICATIONS FOR BUILDING & GRADING
PLAN CHECKING ISSUED UNDER THE PRO-
VISIONS OF SECTION 303(C), LOS ANGELES
COUNTY BUILDING CODE WILL EXPIRE IF NO
PERMIT IS ISSUED WITHIN 180 DAYS.

VALIDATION
CASH ☒ M.O.
8502 A
#... 21
... 36.96
... 36.96
5-28-80

DIST. NO.
12.00

RECEIVED BY Jn
P's

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

FEE RECEIPT

WHEN VALIDATED THIS IS A RECEIPT FOR THE AMOUNT OF FEE COLLECTED AS SHOWN IN SPACE BELOW. THE SERIAL NUMBER, DATE AND AMOUNT VALIDATED HEREON HAS ALSO BEEN VALIDATED ON YOUR APPLICATION OR OTHER DOCUMENT AND HAS BECOME A PART OF THE RECORDS OF THE COUNTY OF LOS ANGELES, FROM WHICH THIS RECEIPT MAY BE IDENTIFIED.

- PLAN CHECKING-VALUATION \$ 9136
STORIES _____ CLASS _____
GRADING PLAN CHECKING _____ VOLUME _____ CU. YDS.
ELECTRICAL PLAN CHECKING _____
PLUMBING PLAN CHECKING _____
MECHANICAL PLAN CHECKING _____
ENERGY PLAN CHECK _____
RELOCATION APPLICATION _____
SPECIAL INSPECTOR _____
JOURNEYMAN PLUMBER EXAMINATION _____

- ☐ WITNESS FEE & MILEAGE
☐ GRADING CASH BOND
☐ TRAILER APPLICATION
☐ E.I.R. FEES
☐ REHEARING FEE

☐ _____

RECEIVED OF: _____

JOB ADDRESS: _____

NOTICE

APPLICATIONS FOR BUILDING & GRADING
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VISIONS OF SECTION 303(C), LOS ANGELES
COUNTY BUILDING CODE WILL EXPIRE IF NO
PERMIT IS ISSUED WITHIN 180 DAYS.

VALIDATION
CASH ☒ CHK M.O.

P.C. 7298

21

1 36.96

5-18-79

DIST. NO.

12

RECEIVED BY _____

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER-FACILITIES
DIVISION OF BUILDING AND SAFETY

STATEMENT TO BE SIGNED BY OWNER PRIOR TO ISSUANCE OF SWIMMING POOL PERMIT

Water drained from swimming pools must not encroach on abutting property.
The following are legal methods of swimming pool waste water disposal:

1. To a sanitary sewer through a 3" P-trap legally installed under permit from the Building and Safety Division of the County of Los Angeles. This applies only to property which is connected to a public sewer. Swimming pool waste water shall not discharge to a private sewage disposal system.
2. To a storm sewer or established storm channel which abuts the property if permission can be obtained from the County Flood Control District. The general information telephone number there is (213) 226-4111.
3. To the street if a permit is first obtained from the County Road Department (213) 226-8188.
4. On the property if the property is large enough to insure that runoff will not encroach on abutting property.
5. In the case where none of the above can be accomplished, the pool contents must be removed by tank truck.

This is to certify that I have read and understand the foregoing and agree to pass this information sheet on to the next subsequent owner.

Mr. & Mrs. Lawrence De Carter
Owner's Signature

5-21-80
Date

Subsequent Owner's Signature

Date

Subsequent Owner's Signature

Date

Subsequent Owner's Signature

Date

EEW:mm 53

Form G - Two copies required.
Owner retains one.

6/79

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class C-53 Lic. Number 190179
Date 5-21-80 Contractor Anthony Pools

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).
☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab.C.) Policy No. 01525260-Company Pacific Employers;

☐ Insurance Co.
☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the county building inspection department.

Date 5-21-80 Applicant Anthony Pools

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name unknown
Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and state laws relating to building construction, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspection purposes.

5-21-80

Date

Anthony Pools

Signature of Applicant or Agent

4023 Rousseau

Job Address

GEOLOGIC REVIEW SHEET

F _____ NF _____

COUNTY OF LOS ANGELES
DEPARTMENT OF ENGINEER-FACILITIES
Environmental Development Division
ENGINEERING GEOLOGY SECTION
738-2161

SHEET / OF /

Site Address 4023 Rousseau
Location Palos Verdes
Developer/Owner Mr. & Mrs. De Caster
Engineer Anthony Pools
Geologist _____
Soils Engineer _____

DISTRIBUTION:

- ☐ Plan Check
- ☒ Dist. Engineer
- ☐ Developer-Owner
- ☐ Site Engineer
- ☐ Geologist
- ☐ Soils Engineer
- ☒ Geol. Sect. File
- ☐ Grading Section

PLAN CHECK NO. OR DATE OF REPORT(S)

Review of:

- ☐ Grading Plan No. _____
- ☒ Building Plan No. Pool 8502
- ☐ Geologic Report Dated _____
- ☐ Soils Report Dated _____
- ☐ Other _____

Action:

- ☒ Plan is approved
- ☐ Plan is not approved for reasons below
- ☐ Plan approved subject to conditions below
- ☐ Submit plans for recheck

Remarks:

Prepared by _____ Reviewed by R. E. Smith Date June 9, 1980